

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AMALGAMATED TRANSIT UNION - COPE

ADDRESS (number and street) ▼

5025 Wisconsin Ave NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20016

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00032995

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lawrence J. Hanley

Signature of Treasurer

Lawrence J. Hanley

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 17 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMALGAMATED TRANSIT UNION - COPE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">194449.94</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">417784.59</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">81376.93</span>	<span style="border: 1px solid black; padding: 2px;">558854.48</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">499161.52</span>	<span style="border: 1px solid black; padding: 2px;">753304.42</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">47100.00</span>	<span style="border: 1px solid black; padding: 2px;">301242.90</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">452061.52</span>	<span style="border: 1px solid black; padding: 2px;">452061.52</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

AMALGAMATED TRANSIT UNION - COPE

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 01 2015

To:

 M M / D D / Y Y Y Y Y  
 07 31 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

5609.02

17454.82

(ii) Unitemized .....

75748.60

541305.90

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

81357.62

558760.72

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

81357.62

558760.72

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

19.31

93.76

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

81376.93

558854.48

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

81376.93

558854.48

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	66000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	25600.00	235242.90
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	47100.00	301242.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47100.00	301242.90

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	81357.62	558760.72
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	81357.62	558760.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JAMES D. FITZGERALD**

Mailing Address 4608 EAST 13TH AVENUE

City State Zip Code  
SPOKANE VALLEY WA 99212-3260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SPOKANE TRANSIT AUTHORITY

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7180546**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. DENNIS CONNOLLY**

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City State Zip Code  
WESTERLY RI 02891-1249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7181130**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City State Zip Code  
EAST PROVIDENCE RI 02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7181159**

Amount of Each Receipt this Period

6.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

61.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 96  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City State Zip Code  
 EAST PROVIDENCE RI 02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 02 2015

**Transaction ID : 7181161**

Amount of Each Receipt this Period

3.00

Full Name (Last, First, Middle Initial)

**B. DAVID C FREMMING**

Mailing Address 172 Longfellow St.

City State Zip Code  
 Providence RI 02907-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 AMALGAMATED TRANSIT UNION

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 02 2015

**Transaction ID : 7181198**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City State Zip Code  
 NORTH PROVIDENCE RI 02904-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 02 2015

**Transaction ID : 7181271**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. THOMAS MILLS

Mailing Address 96 VEAZIE STREET

City

PROVIDENCE

State

RI

Zip Code

02908-2457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2015

Transaction ID : 7181309

Amount of Each Receipt this Period

18.00

Full Name (Last, First, Middle Initial)

B. VIRGINIA A MOFFITT

Mailing Address 90 GRANT AVE

City

CRANSTON

State

RI

Zip Code

02920-7718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2015

Transaction ID : 7181310

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. ERIC ST PIERRE

Mailing Address 46 HIGH STREET

City

WARWICK

State

RI

Zip Code

02886-1256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2015

Transaction ID : 7181406

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

48.00

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 96  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RUTH SULLIVAN**

Mailing Address 68 NARRAGANSETT AVENUE

City  
TIVERTONState  
RIZip Code  
02878-4620FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2015

**Transaction ID : 7181408**

Amount of Each Receipt this Period

11.00

Full Name (Last, First, Middle Initial)

**B. OWEN C SWEETLAND**

Mailing Address 139 ROUNDS AVENUE

City  
RIVERSIDEState  
RIZip Code  
02915-1737FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2015

**Transaction ID : 7181410**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL J HARMS**

Mailing Address 741 AGNEW ROAD

City  
PITTSBURGHState  
PAZip Code  
15227-3802FEC ID number of contributing  
federal political committee.

C

Name of Employer

PORT AUTH-ALLEG - PAT TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2015

**Transaction ID : 7212330**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RALPH T KLUGH**

Mailing Address 3418 CEDAR GLEN DRIVE

City

ALLISON PARK

State

PA

Zip Code

15101-1073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PORT AUTH-ALLEG - PAT TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2015

**Transaction ID : 7212529**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. Matthew Mervoah**

Mailing Address 2022 Chateau St.

City

Pittsburgh

State

PA

Zip Code

15233-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2015

**Transaction ID : 7212722**

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**C. MATTHEW W MORRIS**

Mailing Address 2022 Chateau St.

City

Pittsburgh

State

PA

Zip Code

15233-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PORT AUTH-ALLEG - PAT TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.52

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2015

**Transaction ID : 7212771**

Amount of Each Receipt this Period

61.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

138.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 96

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL THURMOND**

Mailing Address 2022 Chateau St.

City

Pittsburgh

State

PA

Zip Code

15233-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2015

**Transaction ID : 7213161**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Ronald L. Cox**

Mailing Address 8514 S SHYROCK RD

City

GLASFORD

State

IL

Zip Code

61533-9458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GREATER PEORIA MASS TRAN DIST

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	06	/	2015

**Transaction ID : 7213498**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. DENNIS CONNOLLY**

Mailing Address 69 WHITEROCK ROAD

P O BOX 66

City

WESTERLY

State

RI

Zip Code

02891-1249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	06	/	2015

**Transaction ID : 7213777**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

62.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROBERT E DAVIS JR**

Mailing Address 82 VILLAGE DRIVE

City  
RIVERSIDE

State Zip Code  
RI 02915-3951

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2015

**Transaction ID : 7213794**

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**B. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City  
EAST PROVIDENCE

State Zip Code  
RI 02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2015

**Transaction ID : 7213805**

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City  
EAST PROVIDENCE

State Zip Code  
RI 02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2015

**Transaction ID : 7213807**

Amount of Each Receipt this Period

3.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

16.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 96

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. DAVID C FREMMING**

Mailing Address 172 Longfellow St.

City

Providence

State

RI

Zip Code

02907-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2015

**Transaction ID : 7213846**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City

NORTH PROVIDENCE

State

RI

Zip Code

02904-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2015

**Transaction ID : 7213920**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. THOMAS MILLS**

Mailing Address 96 VEAZIE STREET

City

PROVIDENCE

State

RI

Zip Code

02908-2457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 06 / 2015

**Transaction ID : 7213957**

Amount of Each Receipt this Period

9.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

39.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 96

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ERIC ST PIERRE**

Mailing Address 46 HIGH STREET

City

WARWICK

State

RI

Zip Code

02886-1256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2015

**Transaction ID : 7214053**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. RUTH SULLIVAN**

Mailing Address 68 NARRAGANSETT AVENUE

City

TIVERTON

State

RI

Zip Code

02878-4620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2015

**Transaction ID : 7214055**

Amount of Each Receipt this Period

11.00

Full Name (Last, First, Middle Initial)

**C. OWEN C SWEETLAND**

Mailing Address 139 ROUNDS AVENUE

City

RIVERSIDE

State

RI

Zip Code

02915-1737

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2015

**Transaction ID : 7214057**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

41.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 96  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. PATRICIA R BROGAN**

Mailing Address 547 DWILLARD

City

KALAMAZOO

State

MI

Zip Code

49048-2253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

**Transaction ID : 7214140**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. NAOMI I MABON**

Mailing Address 424 S DRAKE ROAD

City

KALAMAZOO

State

MI

Zip Code

49009-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

**Transaction ID : 7214157**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. THOMAS A DEIBLER**

Mailing Address 871 BILLOW DR

City

SAN DIEGO

State

CA

Zip Code

92114-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRANSIT CORP

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	5

**Transaction ID : 7214299**

Amount of Each Receipt this Period

22.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

42.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 96

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JOHNNY SALAZAR**

Mailing Address 141 JEFFERSON STREET

#B

City

CHULA VISTA

State

CA

Zip Code

91910-1372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRANSIT CORP

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2015

**Transaction ID : 7214363**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. CLINTON C DE VOSS**

Mailing Address 3225 GALVIN RD

City

CENTRALIA

State

WA

Zip Code

98531-9061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2015

**Transaction ID : 7215612**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Neal Safrin**

Mailing Address 5451 NE 203RD PLACE

City

LAKE FOREST PARK

State

WA

Zip Code

98155-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2015

**Transaction ID : 7215613**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

70.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 96

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. David Ford**

Mailing Address 25 CHEVERLY ROAD

City	State	Zip Code
LAWRENCEVILLE	NJ	08648-3405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW JERSEY TRANSIT-MERCER INCOccupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2015

**Transaction ID : 7215803**

Amount of Each Receipt this Period

28.86

Full Name (Last, First, Middle Initial)

**B. JOHN GROOME**

Mailing Address 330 University Ave.

City	State	Zip Code
Pemberton	NJ	08068-1757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNIONOccupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2015

**Transaction ID : 7215805**

Amount of Each Receipt this Period

24.00

Full Name (Last, First, Middle Initial)

**C. ROBERT STRUCK**

Mailing Address 330 University Ave.

City	State	Zip Code
Pemberton	NJ	08068-1757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNIONOccupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2015

**Transaction ID : 7215834**

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 18 OF 96  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

**A. RAYMOND B MESSIER**

Mailing Address 9198 WATER ROAD

City	State	Zip Code
COTATI	CA	94931-4271

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 GOLDEN GATE BRIDGE HIGHWAY TRAN

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

Transaction ID : 7219472

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

**B. FRANK HARPER**

Mailing Address 11563 NEWGATE LANE

City	State	Zip Code
CINCINNATI	OH	45240-4434

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 SW OHIO REGIONAL TRANSIT AUTH

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

Transaction ID : 7219889

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. KEITH LAW**

Mailing Address 2840 WERK ROAD

City	State	Zip Code
CINCINNATI	OH	45211-0000

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 SW OHIO REGIONAL TRANSIT AUTH

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

Transaction ID : 7219925

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 96

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. TONIA STARKEY-OBA**

Mailing Address 84 VERSAILLES COURT

City  
CINCINNATIState  
OHZip Code  
45240-3831FEC ID number of contributing  
federal political committee.

C

Name of Employer

SW OHIO REGIONAL TRANSIT AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7220004**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. STANLEY WILLIAMS JR**

Mailing Address 8 WINDING LANE

City

BLOOMFIELD

State

NJ

Zip Code

07003-4311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N J TRANSIT BUS OPERATIONS INC

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7221478**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. CHRIS T ABE**

Mailing Address 500 QUINCY AVENUE NE

City

RENTON

State

WA

Zip Code

98059-4555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223041**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

80.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 20 OF 96  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. WILHELMINIA M ABEL**
 Mailing Address 15110 MACADAM RD S  
 #A208

City	State	Zip Code
TUKWILA	WA	98188-2458

 FEC ID number of contributing  
 federal political committee.

C																			
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼


Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	5		

**Transaction ID : 7223042**

Amount of Each Receipt this Period


Full Name (Last, First, Middle Initial)

**B. MELODY A BRUTSCHER**
 Mailing Address 3625 BEACH DRIVE SW  
 #9

City	State	Zip Code
SEATTLE	WA	98116-0000

 FEC ID number of contributing  
 federal political committee.

C																			
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 Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼


Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	5		

**Transaction ID : 7223136**

Amount of Each Receipt this Period


Full Name (Last, First, Middle Initial)

**C. RAY H CAMPBELL**

Mailing Address 28648 226TH AVENUE SE

City	State	Zip Code
MAPLE VALLEY	WA	98038-0000

 FEC ID number of contributing  
 federal political committee.

C																			
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 Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼


Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	5		

**Transaction ID : 7223148**

Amount of Each Receipt this Period


**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 96  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Calvin E Cummings**

Mailing Address 1407-50TH STREET NE

City  
AUBURNState  
WAZip Code  
98002-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223198**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. JOHN E EATON**

Mailing Address 4634 365TH AVENUE SE

City  
FALL CITYState  
WAZip Code  
98024-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223256**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. DAVID S FAIRBANKS**

Mailing Address 8622 202ND SW

City  
EDMONDSState  
WAZip Code  
98026-6644FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223269**

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

66.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. GALUAFA FETUI**

Mailing Address 2652 SW 335TH PLACE

City

FEDERAL WAY

State

WA

Zip Code

98023-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223275**

Amount of Each Receipt this Period

17.50

Full Name (Last, First, Middle Initial)

## **B. VALARIE K GALLEGOS**

Mailing Address 3101 SE 10TH STREET

City

RENTON

State

WA

Zip Code

98058-2932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223301**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **C. MICHAEL A HALL**

Mailing Address 23621 - 112TH AVENUE SE  
H-204

City

KENT

State

WA

Zip Code

98031-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223350**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

67.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 96

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. PATRICIA C HARDIN**

Mailing Address 2518 136TH STREET SE

City

MILL CREEK

State

WA

Zip Code

98012-4617

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	5		

**Transaction ID : 7223353**

Amount of Each Receipt this Period

17.50

Full Name (Last, First, Middle Initial)

**B. JAMES E HARPER**

Mailing Address 32801-29TH AVENUE SW

City

FEDERAL WAY

State

WA

Zip Code

98023-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	5		

**Transaction ID : 7223354**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. AUDREY R HEDSTROM**

Mailing Address 22413 11TH AVENUE SE

City

KENT

State

WA

Zip Code

98031-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	5		

**Transaction ID : 7223364**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

67.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JERRY L JACOBS**

Mailing Address 2112 NO 41ST

City  
SEATTLE

State  
WA

Zip Code  
98103-8316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223401**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JAMES A JAKEMAN**

Mailing Address 4019 SW 327TH

City  
FEDERAL WAY

State  
WA

Zip Code  
98023-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223404**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. JAMES L JOHNSON**

Mailing Address 8425 46TH AVENUE SO

City  
SEATTLE

State  
WA

Zip Code  
98118-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223424**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 96  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. PHYLLIS G JOHNSON**Mailing Address 360 TAYLOR AVENUE NW  
APT 303

City	State	Zip Code
RENTON	WA	98057-5148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223425**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. KELVIN D KELLEY**

Mailing Address 8603 51ST COURT SW

City	State	Zip Code
UNIVERSITY PLACE	WA	98467-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223456**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. DALE L KOPPERDAHL**Mailing Address 11819 SE 171ST LANE  
#R301

City	State	Zip Code
RENTON	WA	98058-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223472**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 26 OF 96  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. RICHARD L LEONARD

Mailing Address 6114 SO BANGOR STREET

City  
SEATTLEState  
WAZip Code  
98178-2431FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

Transaction ID : 7223494

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. CHARLES N MILLER

Mailing Address 738 34TH AVENUE

City  
SEATTLEState  
WAZip Code  
98122-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

Transaction ID : 7223572

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. ROBERT E MOORE

Mailing Address 14511 SE 252ND PLACE

City  
KENTState  
WAZip Code  
98042-3415FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	5

Transaction ID : 7223587

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MARY J NEWTON**

Mailing Address 22201 MERIDIAN AENUE S

City State Zip Code  
BOTHELL WA 98021-8310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223611**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. ADELITA ORTIZ**

Mailing Address 4136 13TH AVENUE S

City State Zip Code  
SEATTLE WA 98108-1422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223636**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. RACHEL A PRICE**

Mailing Address 5935 FAUNTLEROY WAY SW

#C

City State Zip Code  
SEATTLE WA 98136-1797

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223667**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 96

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JAMES E REESE**

Mailing Address 15442-38TH TERRACE S  
#C-101

City State Zip Code  
TUKWILA WA 98188-8038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223687**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JOSE A ROSADO**

Mailing Address 445 SW 144TH STREET

City State Zip Code  
SEATTLE WA 98166-1545

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223704**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. ALANA E SOREM**

Mailing Address 19853 25TH AVENUE NE  
#314

City State Zip Code  
SHORELINE WA 98155-1364

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223761**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 96

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. STANLEY C STRAKER**

Mailing Address 721 ASHLEY COURT E

City  
BUCKLEY

State  
WA

Zip Code  
98321-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
07 / 07 / 2015

Transaction ID : 7223778

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. THERESA L TOBIN**

Mailing Address 19001 96TH AVENUE COURT E

City  
PUYALLUP

State  
WA

Zip Code  
98375-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
07 / 07 / 2015

Transaction ID : 7223810

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. ROGENE H TOLSON**

Mailing Address 21210 38TH AVENUE EAST

City  
SPANAWAY

State  
WA

Zip Code  
98387-6866

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

MM / DD / YYYY  
07 / 07 / 2015

Transaction ID : 7223811

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JIMMY O VANN**

Mailing Address 3223 S MONROE STREET

City  
TACOMAState  
WAZip Code  
98409-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223832**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JERRY WALLACE**Mailing Address 2815 Second Ave.  
Suite 230City  
SeattleState  
WAZip Code  
98121-1261FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223840**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. DONALD L WARD**

Mailing Address 2538 S RAYMOND ST

City  
SEATTLEState  
WAZip Code  
98108-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2015

**Transaction ID : 7223843**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. CAREY P WATSON**

Mailing Address 17905 140TH LANE NE  
#115

City State Zip Code  
WOODINVILLE WA 98072-6803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223846**

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**B. KELLY R WICKHAM**

Mailing Address 6706 N VAN DE CAR RD SE

City State Zip Code  
PORT ORCHARD WA 98367-8506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7223865**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. MARY JO NEUMONT**

Mailing Address 376 Anawanda Ave.

City State Zip Code  
Pittsburgh PA 15228-2439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : 7224327**

Amount of Each Receipt this Period

37.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

83.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. NANCY J REED**

Mailing Address 70 CASTLE SHANNON BLVD

City

PITTSBURGH

State

PA

Zip Code

15228-2202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

344.75

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	5		

**Transaction ID : 7224336**

Amount of Each Receipt this Period

49.25

Full Name (Last, First, Middle Initial)

**B. JACQUES CHAPMAN**

Mailing Address 5770 DALTON DRIVE

City

FARMINGTON

State

NY

Zip Code

14425-9329

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REGIONAL TRANSIT SERVICE INC

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	1	5		

**Transaction ID : 7229210**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. ROBERT J MAZZEI**

Mailing Address 2022 Chateau St.

City

Pittsburgh

State

PA

Zip Code

15233-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	1	5		

**Transaction ID : 7229481**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

141.25

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. PAUL KAPLAN**

Mailing Address PO BOX 2561

City

BOCA RATON

State

FL

Zip Code

33427-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PALM TRAN INC

Occupation

Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

**Transaction ID : 7229804**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. DIANA M HERMONE**

Mailing Address 1590 La Pradera Dr.

City

Campbell

State

CA

Zip Code

95008-1533

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	1	5

**Transaction ID : 7230270**

Amount of Each Receipt this Period

160.00

Full Name (Last, First, Middle Initial)

**C. SHERYL CULVER**Mailing Address 6923 Lakewood Dr. W.  
Suite B1

City

Tacoma

State

WA

Zip Code

98467-3221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	5

**Transaction ID : 7239518**

Amount of Each Receipt this Period

41.67

**SUBTOTAL** of Receipts This Page (optional)..... ►

241.67

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. SAMANTHA M SHARP**

Mailing Address 312 Central Ave. SE  
Suite 345

City State Zip Code  
Minneapolis MN 55414-1088

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 13 / 2015

**Transaction ID : 7239678**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. DEBORAH J SIEVERS**

Mailing Address 644 LOWRY AVENUE NE

City State Zip Code  
MINNEAPOLIS MN 55418-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
METROPOLITAN

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 13 / 2015

**Transaction ID : 7239681**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. CARLOS CURIEL JR**

Mailing Address 12821 N RIM WAY

City State Zip Code  
RANCHO CUCAMONGA CA 91739-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LOS ANGELES CTY METRO TRAN AUT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 13 / 2015

**Transaction ID : 7241037**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. BRUCE A MACKIN**

Mailing Address 4410 W WALWORTH ROAD

City  
MACEDON

State Zip Code  
NY 14502-9381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REGIONAL TRANSIT SERVICE INC

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7242417**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. DENNIS CONNOLLY**

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City  
WESTERLY

State Zip Code  
RI 02891-1249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243127**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. ROBERT E DAVIS JR**

Mailing Address 82 VILLAGE DRIVE

City  
RIVERSIDE

State Zip Code  
RI 02915-3951

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243142**

Amount of Each Receipt this Period

7.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

27.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City State Zip Code  
EAST PROVIDENCE RI 02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243153**

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**B. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City State Zip Code  
EAST PROVIDENCE RI 02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243155**

Amount of Each Receipt this Period

3.00

Full Name (Last, First, Middle Initial)

**C. DAVID C FREMMING**

Mailing Address 172 Longfellow St.

City State Zip Code  
Providence RI 02907-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243192**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

19.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City State Zip Code  
NORTH PROVIDENCE RI 02904-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243263**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. VIRGINIA A MOFFITT**

Mailing Address 90 GRANT AVE

City State Zip Code  
CRANSTON RI 02920-7718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243301**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. ERIC ST PIERRE**

Mailing Address 46 HIGH STREET

City State Zip Code  
WARWICK RI 02886-1256

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243394**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RUTH SULLIVAN**

Mailing Address 68 NARRAGANSETT AVENUE

City State Zip Code  
TIVERTON RI 02878-4620

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243396**

Amount of Each Receipt this Period

11.00

Full Name (Last, First, Middle Initial)

**B. OWEN C SWEETLAND**

Mailing Address 139 ROUNDS AVENUE

City State Zip Code  
RIVERSIDE RI 02915-1737

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243398**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. DENISE P MANAGALT**

Mailing Address 17 BOWMAN STREET

City State Zip Code  
SARATOGA SPRINGS NY 12866-5235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPITAL DIST TRANSIT DIST INC

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7243541**

Amount of Each Receipt this Period

38.48

**SUBTOTAL** of Receipts This Page (optional)..... ►

59.48

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. CLIFFORD T GARDNER**

Mailing Address 70 WILLOW AVENUE

City  
FAIRFAX

State  
CA

Zip Code  
94930-1246

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 17 / 2015

Transaction ID : 7244801

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. PHILLIP GRAY JR**

Mailing Address PO BOX 2301

City  
SAN RAFAEL

State  
CA

Zip Code  
94912-2301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 17 / 2015

Transaction ID : 7244804

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL R LESESNE**

Mailing Address 9522 CAMELOT DRIVE

City  
WINDSOR

State  
CA

Zip Code  
95492-7973

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 17 / 2015

Transaction ID : 7244835

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. WILFRED M OWENS**

Mailing Address 336 OHIO STREET

City  
VALLEJO

State  
CA

Zip Code  
94590-5053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDEN GATE BRIDGE HIGHWAY TRAN

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

07 / 17 / 2015

Transaction ID : 7244861

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. JACKIE L JETER**

Mailing Address 711 HAACK PLACE

City

UPPER MARLBORO

State

MD

Zip Code

20774-2164

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WASH METRO AREA TRANSIT AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

07 / 18 / 2015

Transaction ID : 7244922

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. ROLAND H JETER**

Mailing Address 711 HAACK PLACE

City

UPPER MARLBORO

State

MD

Zip Code

20774-2164

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WASH METRO AREA TRANSIT AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

07 / 18 / 2015

Transaction ID : 7244924

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

167.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. PATRICIA R BROGAN**

Mailing Address 547 DWILLARD

City

KALAMAZOO

State

MI

Zip Code

49048-2253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 18 / 2015

**Transaction ID : 7248430**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. NAOMI I MABON**

Mailing Address 424 S DRAKE ROAD

City

KALAMAZOO

State

MI

Zip Code

49009-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 18 / 2015

**Transaction ID : 7248447**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. STEVEN F BECKER**

Mailing Address 125 S. St.

Unit 343

City

Vernon

State

CT

Zip Code

06066-4468

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 22 / 2015

**Transaction ID : 7248703**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

45.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. STEVEN F BECKER**

Mailing Address 125 S. St.  
Unit 343

City State Zip Code  
Vernon CT 06066-4468

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 22 / 2015

**Transaction ID : 7248713**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. FRANK HARPER**

Mailing Address 11563 NEWGATE LANE

City State Zip Code  
CINCINNATI OH 45240-4434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SW OHIO REGIONAL TRANSIT AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 22 / 2015

**Transaction ID : 7248842**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. KEITH LAW**

Mailing Address 2840 WERK ROAD

City State Zip Code  
CINCINNATI OH 45211-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SW OHIO REGIONAL TRANSIT AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 22 / 2015

**Transaction ID : 7248878**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. INGA M MC GLOTHIN-SHAMBRA**

Mailing Address 1565 RUTH AVENUE

City State Zip Code  
 CINCINNATI OH 45207-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SW OHIO REGIONAL TRANSIT AUTH

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
 07 / 22 / 2015

**Transaction ID : 7248898**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

## **B. TROY L MILLER**

Mailing Address 4206 RYAN COURT

City State Zip Code  
 LIBERTY TWP OH 45011-8193

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SW OHIO REGIONAL TRANSIT AUTH

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY  
 07 / 22 / 2015

**Transaction ID : 7248905**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

## **C. TONIA STARKEY-OBA**

Mailing Address 84 VERSAILLES COURT

City State Zip Code  
 CINCINNATI OH 45240-3831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SW OHIO REGIONAL TRANSIT AUTH

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY  
 07 / 22 / 2015

**Transaction ID : 7248958**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

55.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. CHRIS T ABE**

Mailing Address 500 QUINCY AVENUE NE

City  
RENTON

State  
WA

Zip Code  
98059-4555

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250559**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. WILHELMINIA M ABEL**

Mailing Address 15110 MACADAM RD S  
#A208

City  
TUKWILA

State  
WA

Zip Code  
98188-2458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250560**

Amount of Each Receipt this Period

17.50

Full Name (Last, First, Middle Initial)

## **C. KEVIN P BARTLEIN**

Mailing Address 1729 WHITMAN AVENUE NE

City  
RENTON

State  
WA

Zip Code  
98059-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250602**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

57.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. MARK H BELL**

Mailing Address 14547 NE 40TH STREET  
#J201

City State Zip Code  
BELLEVUE WA 98007-3383

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250612**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

## **B. MELODY A BRUTSCHER**

Mailing Address 3625 BEACH DRIVE SW  
#9

City State Zip Code  
SEATTLE WA 98116-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250653**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. MICHAEL R BURR**

Mailing Address 11 I STREET SE

City State Zip Code  
AUBURN WA 98002-5657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250657**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ERIC K BUTLER**

Mailing Address 8860 122ND COURT SE

City  
NEW CASTLE

State Zip Code  
WA 98056-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250659**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. RAY H CAMPBELL**

Mailing Address 28648 226TH AVENUE SE

City  
MAPLE VALLEY

State Zip Code  
WA 98038-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250665**

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL CHILDS**

Mailing Address 2815 Second Ave.  
Suite 230

City  
Seattle

State Zip Code  
WA 98121-1261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250682**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

52.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. WILLIAM G CLIFFORD**

Mailing Address 161 22ND AVENUE

City  
SEATTLE

State  
WA

Zip Code  
98122-6035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250689**

Amount of Each Receipt this Period

15.10

Full Name (Last, First, Middle Initial)

**B. MARK J DE BORD**

Mailing Address 12510 VALLEY AVENUE E

City  
PUYALLUP

State  
WA

Zip Code  
98372-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250730**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL C DONOW**

Mailing Address 328 NO MADISON STREET

City  
MONROE

State  
WA

Zip Code  
98272-1820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250748**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JOHN E EATON**

Mailing Address 4634 365TH AVENUE SE

City State Zip Code  
 FALL CITY WA 98024-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7250768**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. DAVID S FAIRBANKS**

Mailing Address 8622 202ND SW

City State Zip Code  
 EDMONDS WA 98026-6644

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7250781**

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**C. GALUAFA FETUI**

Mailing Address 2652 SW 335TH PLACE

City State Zip Code  
 FEDERAL WAY WA 98023-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7250787**

Amount of Each Receipt this Period

17.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

63.50



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. VALARIE K GALLEGOS**

Mailing Address 3101 SE 10TH STREET

City  
RENTONState  
WAZip Code  
98058-2932FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2015

**Transaction ID : 7250811**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. MARILYN P GARY**Mailing Address 2405 S STAR LAKE ROAD  
APT 65-303

City

FEDERAL WAY

State

WA

Zip Code

98003-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2015

**Transaction ID : 7250813**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. STACY A GOSBY**

Mailing Address 3713 S 257TH STREET

City

KENT

State

WA

Zip Code

98032-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2015

**Transaction ID : 7250834**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A HALL**

Mailing Address 23621 - 112TH AVENUE SE  
H-204

City State Zip Code  
KENT WA 98031-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 20 2015

**Transaction ID : 7250858**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. ESTHER L HANKERSON**

Mailing Address 23005 NE 150TH

City State Zip Code  
WOODINVILLE WA 98072-7209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 20 2015

**Transaction ID : 7250859**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. PATRICIA C HARDIN**

Mailing Address 2518 136TH STREET SE

City State Zip Code  
MILL CREEK WA 98012-4617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 20 2015

**Transaction ID : 7250861**

Amount of Each Receipt this Period

17.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

52.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JAMES E HARPER**

Mailing Address 32801-29TH AVENUE SW

City

FEDERAL WAY

State

WA

Zip Code

98023-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 20 / 2015

Transaction ID : 7250862

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. AUDREY R HEDSTROM**

Mailing Address 22413 11TH AVENUE SE

City

KENT

State

WA

Zip Code

98031-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 20 / 2015

Transaction ID : 7250872

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. TOYA L HUDSON**

Mailing Address 4930 SW 319TH LANE  
APT G-204

City

FEDERAL WAY

State

WA

Zip Code

98023-3715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

07 / 20 / 2015

Transaction ID : 7250896

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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 (check only one)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JERRY L JACOBS**

Mailing Address 2112 NO 41ST

 City  
 SEATTLE

 State  
 WA

 Zip Code  
 98103-8316

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	20	/	2015

Transaction ID : 7250909

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JAMES A JAKEMAN**

Mailing Address 4019 SW 327TH

 City  
 FEDERAL WAY

 State  
 WA

 Zip Code  
 98023-0000

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	20	/	2015

Transaction ID : 7250912

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. R CRAIG JEFFERSON**

Mailing Address 12718 48TH AVENUE

 City  
 MARYSVILLE

 State  
 WA

 Zip Code  
 98271-8619

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

 Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	20	/	2015

Transaction ID : 7250919

Amount of Each Receipt this Period

14.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

59.50

**TOTAL** This Period (last page this line number only)..... ►

59.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JAMES L JOHNSON**

Mailing Address 8425 46TH AVENUE SO

City  
SEATTLEState  
WAZip Code  
98118-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0		2	0	1	5		

**Transaction ID : 7250932**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. PHYLLIS G JOHNSON**Mailing Address 360 TAYLOR AVENUE NW  
APT 303City  
RENTONState  
WAZip Code  
98057-5148FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0		2	0	1	5		

**Transaction ID : 7250933**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. KELVIN D KELLEY**

Mailing Address 8603 51ST COURT SW

City  
UNIVERSITY PLACEState  
WAZip Code  
98467-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0		2	0	1	5		

**Transaction ID : 7250964**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. DALE L KOPPERDAHL**

Mailing Address 11819 SE 171ST LANE  
#R301

City State Zip Code  
RENTON WA 98058-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7250982**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. RICHARD L LEONARD**

Mailing Address 6114 SO BANGOR STREET

City State Zip Code  
SEATTLE WA 98178-2431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251004**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL J MARTINI**

Mailing Address 2015 S 301ST STREET

City State Zip Code  
FEDERAL WAY WA 98003-4237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251047**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. CHARLES N MILLER**

Mailing Address 738 34TH AVENUE

City  
SEATTLE

State Zip Code  
WA 98122-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

Transaction ID : 7251081

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**B. ROBERT E MOORE**

Mailing Address 14511 SE 252ND PLACE

City  
KENT

State Zip Code  
WA 98042-3415

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

Transaction ID : 7251096

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**C. Paul B Neil**

Mailing Address 1701 157TH AVENUE NE  
#A101

City  
BELLEVUE

State Zip Code  
WA 98008-2777

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

Transaction ID : 7251113

Amount of Each Receipt this Period

17.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

54.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. MARY J NEWTON**

Mailing Address 22201 MERIDIAN AENUE S

City  
BOTHELL

State  
WA

Zip Code  
98021-8310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251121**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. ADELITA ORTIZ**

Mailing Address 4136 13TH AVENUE S

City  
SEATTLE

State  
WA

Zip Code  
98108-1422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251146**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. LATONYA D PLUMMER-GREASON**

Mailing Address 16316 18TH AVE E

City  
TACOMA

State  
WA

Zip Code  
98445-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251169**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 96  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. RACHEL A PRICE**

Mailing Address 5935 FAUNTLEROY WAY SW

#C

City  
SEATTLEState  
WAZip Code  
98136-1797FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2015

**Transaction ID : 7251177**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. JOSEPH F REED**Mailing Address 11424 1ST AVENUE S  
UNIT 304City  
SEATTLEState  
WAZip Code  
98168-0000FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2015

**Transaction ID : 7251195**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. JAMES E REESE**Mailing Address 15442-38TH TERRACE S  
#C-101City  
TUKWILAState  
WAZip Code  
98188-8038FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2015

**Transaction ID : 7251197**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JOSE A ROSADO**

Mailing Address 445 SW 144TH STREET

City  
SEATTLE

State  
WA

Zip Code  
98166-1545

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251214**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Neal Safrin**

Mailing Address 5451 NE 203RD PLACE

City

LAKE FOREST PARK

State

WA

Zip Code

98155-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251224**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. DEBORAH L SNIDER**

Mailing Address 9020 MEADOW ROAD SW

City

TACOMA

State

WA

Zip Code

98499-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251264**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

55.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ALANA E SOREM**

Mailing Address 19853 25TH AVENUE NE  
#314

City State Zip Code  
SHORELINE WA 98155-1364

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251265**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. STANLEY C STRAKER**

Mailing Address 721 ASHLEY COURT E

City State Zip Code  
BUCKLEY WA 98321-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251282**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. THERESA L TOBIN**

Mailing Address 19001 96TH AVENUE COURT E

City State Zip Code  
PUYALLUP WA 98375-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251314**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROGENE H TOLSON**

Mailing Address 21210 38TH AVENUE EAST

City  
SPANAWAY

State  
WA

Zip Code  
98387-6866

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251315**

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**B. JEREMY B UNE**

Mailing Address 31600 12TH AVENUE SW

City

FEDERAL WAY

State

WA

Zip Code

98023-4706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251330**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. JIMMY O VANN**

Mailing Address 3223 S MONROE STREET

City

TACOMA

State

WA

Zip Code

98409-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING COUNTY DOT-METRO TRANSIT

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251336**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

61.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JERRY WALLACE**

Mailing Address 2815 Second Ave.  
Suite 230

City State Zip Code  
Seattle WA 98121-1261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251344**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. DONALD L WARD**

Mailing Address 2538 S RAYMOND ST

City State Zip Code  
SEATTLE WA 98108-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251347**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. CAREY P WATSON**

Mailing Address 17905 140TH LANE NE  
#115

City State Zip Code  
WOODINVILLE WA 98072-6803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KING COUNTY DOT-METRO TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7251350**

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

71.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. KELLY R WICKHAM**

Mailing Address 6706 N VAN DE CAR RD SE

City State Zip Code  
 PORT ORCHARD WA 98367-8506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7251368**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. EDWARD N WILLIAMS JR**

Mailing Address 11109 NE 124TH LANE  
 #B-307

City State Zip Code  
 KIRKLAND WA 98034-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7251376**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. CLINTON C DE VOSS**

Mailing Address 3225 GALVIN RD

City State Zip Code  
 CENTRALIA WA 98531-9061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 KING COUNTY DOT-METRO TRANSIT

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7251425**

Amount of Each Receipt this Period

22.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

62.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. PATRICIA R BROGAN**

Mailing Address 547 DWILLARD

City

KALAMAZOO

State

MI

Zip Code

49048-2253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

**Transaction ID : 7251573**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. NAOMI I MABON**

Mailing Address 424 S DRAKE ROAD

City

KALAMAZOO

State

MI

Zip Code

49009-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

**Transaction ID : 7251589**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. PAUL KAPLAN**

Mailing Address PO BOX 2561

City

BOCA RATON

State

FL

Zip Code

33427-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PALM TRAN INC

Occupation

Operator

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	1	5

**Transaction ID : 7251845**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. BRUCE A MACKIN**

Mailing Address 4410 W WALWORTH ROAD

City  
MACEDON

State Zip Code  
NY 14502-9381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REGIONAL TRANSIT SERVICE INC

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2015

**Transaction ID : 7253367**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. JOHN A TROTT**

Mailing Address 170 ELLINWOOD DRIVE

City  
ROCHESTER

State Zip Code  
NY 14622-2334

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REGIONAL TRANSIT SERVICE INC

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2015

**Transaction ID : 7253433**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Ronald L. Cox**

Mailing Address 8514 S SHYROCK RD

City  
GLASFORD

State Zip Code  
IL 61533-9458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GREATER PEORIA MASS TRAN DIST

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : 7253487**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

40.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. THOMAS A DEIBLER**

Mailing Address 871 BILLOW DR

City

SAN DIEGO

State

CA

Zip Code

92114-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRANSIT CORP

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

**Transaction ID : 7255060**

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

**B. JOHNNY SALAZAR**Mailing Address 141 JEFFERSON STREET  
#B

City

CHULA VISTA

State

CA

Zip Code

91910-1372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN DIEGO TRANSIT CORP

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

**Transaction ID : 7255130**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. CHERI L ADAMS**

Mailing Address 1304 E GARLAND

City

SPOKANE

State

WA

Zip Code

99207-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPOKANE TRANSIT AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

**Transaction ID : 7255318**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

72.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JAMES D. FITZGERALD**

Mailing Address 4608 EAST 13TH AVENUE

City

SPOKANE VALLEY

State

WA

Zip Code

99212-3260

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPOKANE TRANSIT AUTHORITY

Occupation

OPERATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : 7255357**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. CARLOS CURIEL JR**

Mailing Address 12821 N RIM WAY

City

RANCHO CUCAMONGA

State

CA

Zip Code

91739-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LOS ANGELES CTY METRO TRAN AUT

Occupation

OPERATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : 7256098**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. BRUCE A MACKIN**

Mailing Address 4410 W WALWORTH ROAD

City

MACEDON

State

NY

Zip Code

14502-9381

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REGIONAL TRANSIT SERVICE INC

Occupation

OPERATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : 7258169**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JOHN A TROTT**

Mailing Address 170 ELLINWOOD DRIVE

City

ROCHESTER

State

NY

Zip Code

14622-2334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REGIONAL TRANSIT SERVICE INC

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : 7258243**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. PATRICIA R BROGAN**

Mailing Address 547 DWILLARD

City

KALAMAZOO

State

MI

Zip Code

49048-2253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : 7258267**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. NAOMI I MABON**

Mailing Address 424 S DRAKE ROAD

City

KALAMAZOO

State

MI

Zip Code

49009-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : 7258283**

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

30.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. WILLIAM J CARON**

Mailing Address 1861 RODMAN STREET

City  
FALL RIVER

State Zip Code  
MA 02721-3528

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNION STREET BUS COMPANY

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 28 / 2015

**Transaction ID : 7259170**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. Cecelia Joyce Jernigan**

Mailing Address 205 West Wacker Dr.

City  
Chicago

State Zip Code  
IL 60606-1216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 28 / 2015

**Transaction ID : 7259885**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Anthony L. Jones**

Mailing Address 4860 KINGS COURT

City  
RICHTON PARK

State Zip Code  
IL 60471-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHICAGO TRANSIT AUTHORITY RAIL

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 28 / 2015

**Transaction ID : 7259902**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

## **A. DENNIS CONNOLLY**

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City State Zip Code  
WESTERLY RI 02891-1249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7266692**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **B. ROBERT E DAVIS JR**

Mailing Address 82 VILLAGE DRIVE

City State Zip Code  
RIVERSIDE RI 02915-3951

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7266707**

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

## **C. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City State Zip Code  
EAST PROVIDENCE RI 02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7266720**

Amount of Each Receipt this Period

6.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City State Zip Code  
 EAST PROVIDENCE RI 02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7266722**

Amount of Each Receipt this Period

3.00

Full Name (Last, First, Middle Initial)

**B. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City State Zip Code  
 NORTH PROVIDENCE RI 02904-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7266833**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. THOMAS MILLS**

Mailing Address 96 VEAZIE STREET

City State Zip Code  
 PROVIDENCE RI 02908-2457

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : 7266871**

Amount of Each Receipt this Period

9.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

22.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. VIRGINIA A MOFFITT**

Mailing Address 90 GRANT AVE

City  
CRANSTON

State  
RI

Zip Code  
02920-7718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7266872**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. ERIC ST PIERRE**

Mailing Address 46 HIGH STREET

City  
WARWICK

State  
RI

Zip Code  
02886-1256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7266977**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. RUTH SULLIVAN**

Mailing Address 68 NARRAGANSETT AVENUE

City  
TIVERTON

State  
RI

Zip Code  
02878-4620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7266979**

Amount of Each Receipt this Period

11.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

41.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. OWEN C SWEETLAND**

Mailing Address 139 ROUNDS AVENUE

City  
RIVERSIDE

State Zip Code  
RI 02915-1737

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : 7266981**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. David Alvarez**

Mailing Address 981 JEFFERSON AVENUE  
APT 4L

City  
BROOKLYN

State Zip Code  
NY 11221-4243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7267467**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Dawn M Anderson**

Mailing Address 49 BOLIVAR STREET

City  
STATEN ISLAND

State Zip Code  
NY 10314-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7267477**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

55.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Thomas J Carney**

Mailing Address 220 PLYMOUTH DRIVE

City  
FREEHOLD

State Zip Code  
NY 12431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7267628**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Daniel J Cassella**

Mailing Address 347 GOWER ST

City  
STATEN ISLAND

State Zip Code  
NY 10314-5331

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7267638**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Eugene A Crocco**

Mailing Address 2153 58TH STREET  
APT 2

City  
BROOKLYN

State Zip Code  
NY 11204-2014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7267702**

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Robert Giudice**

Mailing Address 46 LAFORGE AVENUE

City

STATEN ISLAND

State

NY

Zip Code

10302-1633

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CITY TRANSIT AUTHOR

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7267922**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Thomas J Mason**

Mailing Address 2512 OLD STONE MILL DR

City

EAST WINDSOR

State

NJ

Zip Code

08512-2222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268185**

Amount of Each Receipt this Period

31.00

Full Name (Last, First, Middle Initial)

**C. Daniel C Mc Sorley**

Mailing Address 49 HUDSON AVENUE

City

NORTH MIDDLETOWN

State

NJ

Zip Code

07748-5512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CITY TRANSIT AUTHOR

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268200**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

81.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Samuel Moore**

Mailing Address 118 COOLIDGE AVENUE

City  
AMITYVILLE

State Zip Code  
NY 11701-2475

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268267**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. George J Okie**

Mailing Address 4600 BLUERIDGE COURT  
APT 4631

City  
WALLINGTON

State Zip Code  
NY 14551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268306**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Andrew G Poulos**

Mailing Address 568 80TH STREET

City  
BROOKLYN

State Zip Code  
NY 11209-4010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268389**

Amount of Each Receipt this Period

19.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

59.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Eric J Update**

Mailing Address 30 A GREENTREE LANE  
#2

City State Zip Code  
STATEN ISLAND NY 10314-1601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268679**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Andrew H Vanore**

Mailing Address 15 GUILFORD STREET

City State Zip Code  
STATEN ISLAND NY 10305-4703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268690**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**c. Christopher Waymer**

Mailing Address 201 HAMILTON AVE  
APT 4A

City State Zip Code  
STATEN ISLAND NY 10301-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268730**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. David Alvarez**

Mailing Address 981 JEFFERSON AVENUE  
APT 4L

City State Zip Code  
BROOKLYN NY 11221-4243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268829**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Dawn M Anderson**

Mailing Address 49 BOLIVAR STREET

City State Zip Code  
STATEN ISLAND NY 10314-5603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268838**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Thomas J Carney**

Mailing Address 220 PLYMOUTH DRIVE

City State Zip Code  
FREEHOLD NY 12431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CITY TRANSIT AUTHOR

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268989**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Daniel J Cassella**

Mailing Address 347 GOWER ST

City

STATEN ISLAND

State

NY

Zip Code

10314-5331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7268999**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Eugene A Crocco**

Mailing Address 2153 58TH STREET  
APT 2

City

BROOKLYN

State

NY

Zip Code

11204-2014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CITY TRANSIT AUTHOR

Occupation

OPERATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7269062**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Robert Giudice**

Mailing Address 46 LAFORGE AVENUE

City

STATEN ISLAND

State

NY

Zip Code

10302-1633

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CITY TRANSIT AUTHOR

Occupation

OPERATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7269282**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Thomas J Mason**

Mailing Address 2512 OLD STONE MILL DR

City State Zip Code  
 EAST WINDSOR NJ 08512-2222

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 AMALGAMATED TRANSIT UNION

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 30 2015

**Transaction ID : 7269535**

Amount of Each Receipt this Period

31.00

Full Name (Last, First, Middle Initial)

**B. Daniel C Mc Sorley**

Mailing Address 49 HUDSON AVENUE

City State Zip Code  
 NORTH MIDDLETOWN NJ 07748-5512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NEW YORK CITY TRANSIT AUTHOR

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 30 2015

**Transaction ID : 7269550**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Samuel Moore**

Mailing Address 118 COOLIDGE AVENUE

City State Zip Code  
 AMITYVILLE NY 11701-2475

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 AMALGAMATED TRANSIT UNION

Occupation  
 OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 30 2015

**Transaction ID : 7269617**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

76.00

**TOTAL** This Period (last page this line number only)..... ►

X	11a		11b		11c		12		
	13		14		15		16		17

AMALGAMATED TRANSIT UNION - COPE

[illegible]



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Andrew H Vanore**

Mailing Address 15 GUILFORD STREET

City

STATEN ISLAND

State

NY

Zip Code

10305-4703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3		2	0	1	5		

**Transaction ID : 7270041**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Christopher Waymer**Mailing Address 201 HAMILTON AVE  
APT 4A

City

STATEN ISLAND

State

NY

Zip Code

10301-1630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CITY TRANSIT AUTHOR

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3		2	0	1	5		

**Transaction ID : 7270081**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. DENNIS CONNOLLY**Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City

WESTERLY

State

RI

Zip Code

02891-1249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3		2	0	1	5		

**Transaction ID : 7270215**

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. ROBERT E DAVIS JR**

Mailing Address 82 VILLAGE DRIVE

City

RIVERSIDE

State

RI

Zip Code

02915-3951

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7270229

Amount of Each Receipt this Period

7.50

Full Name (Last, First, Middle Initial)

**B. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City

EAST PROVIDENCE

State

RI

Zip Code

02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7270242

Amount of Each Receipt this Period

6.00

Full Name (Last, First, Middle Initial)

**C. ADRIAN DELGADO JR**

Mailing Address 182 GROSVENOR AVENUE

City

EAST PROVIDENCE

State

RI

Zip Code

02914-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7270244

Amount of Each Receipt this Period

3.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

16.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. DAVID C FREMMING**

Mailing Address 172 Longfellow St.

City

Providence

State

RI

Zip Code

02907-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMALGAMATED TRANSIT UNION

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7270278

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. ROGER LIMA JR**

Mailing Address 4 JACKSON ST

City

NORTH PROVIDENCE

State

RI

Zip Code

02904-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7270349

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. THOMAS MILLS**

Mailing Address 96 VEAZIE STREET

City

PROVIDENCE

State

RI

Zip Code

02908-2457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RHODE ISLAND PUBLIC TRANS AUTH

Occupation

OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7270382

Amount of Each Receipt this Period

9.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

29.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. VIRGINIA A MOFFITT**

Mailing Address 90 GRANT AVE

City  
CRANSTON

State Zip Code  
RI 02920-7718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7270383**

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B. ERIC ST PIERRE**

Mailing Address 46 HIGH STREET

City  
WARWICK

State Zip Code  
RI 02886-1256

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7270480**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. RUTH SULLIVAN**

Mailing Address 68 NARRAGANSETT AVENUE

City  
TIVERTON

State Zip Code  
RI 02878-4620

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7270482**

Amount of Each Receipt this Period

11.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. OWEN C SWEETLAND

Mailing Address 139 ROUNDS AVENUE

City  
RIVERSIDE

State Zip Code  
RI 02915-1737

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RHODE ISLAND PUBLIC TRANS AUTH

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 30 2015

Transaction ID : 7270484

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. MICHAEL J HARMS

Mailing Address 741 AGNEW ROAD

City  
PITTSBURGH

State Zip Code  
PA 15227-3802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PORT AUTH-ALLEG - PAT TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 30 2015

Transaction ID : 7271414

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. RALPH T KLUGH

Mailing Address 3418 CEDAR GLEN DRIVE

City  
ALLISON PARK

State Zip Code  
PA 15101-1073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PORT AUTH-ALLEG - PAT TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 30 2015

Transaction ID : 7271612

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Matthew Mervoah**

Mailing Address 2022 Chateau St.

City State Zip Code  
Pittsburgh PA 15233-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7271812**

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**B. MATTHEW W MORRIS**

Mailing Address 2022 Chateau St.

City State Zip Code  
Pittsburgh PA 15233-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PORT AUTH-ALLEG - PAT TRANSIT

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7271861**

Amount of Each Receipt this Period

61.42

Full Name (Last, First, Middle Initial)

**C. MICHAEL THURMOND**

Mailing Address 2022 Chateau St.

City State Zip Code  
Pittsburgh PA 15233-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMALGAMATED TRANSIT UNION

Occupation  
OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7272252**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. CHARLES BROWN**

Mailing Address 861 N 16TH STREET

City

SAN JOSE

State

CA

Zip Code

95112-1546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTA CLARA VLY TRANS. AUTH.

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

Transaction ID : 7279881

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. NINOUS EDWARDS**

Mailing Address 1008 N ABBOTT AVENUE

City

MILPITAS

State

CA

Zip Code

95035-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTA CLARA VLY TRANS. AUTH.

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

Transaction ID : 7279950

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. THOMAS LOPROTO**

Mailing Address 458 MC CAMISH AVENUE

City

SAN JOSE

State

CA

Zip Code

95123-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTA CLARA VLY TRANS. AUTH.

Occupation

OPERATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

Transaction ID : 7280066

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

110.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. JESS A MARTINEZ**

Mailing Address 3801 SAINT NICHOLAS DRIVE

City	State	Zip Code
MODESTO	CA	95356-2446

FEC ID number of contributing  
federal political committee.

C

Name of Employer	Occupation
SANTA CLARA VLY TRANS. AUTH.	OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

**Transaction ID : 7280084**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL O'TOOLE**

Mailing Address 1590 La Pradera Dr.

City	State	Zip Code
Campbell	CA	95008-1533

FEC ID number of contributing  
federal political committee.

C

Name of Employer	Occupation
AMALGAMATED TRANSIT UNION	OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

**Transaction ID : 7280133**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. LISA PRIETO**Mailing Address 5300 TERNER WAY  
#5105

City	State	Zip Code
SAN JOSE	CA	95136-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer	Occupation
SANTA CLARA VLY TRANS. AUTH.	OPERATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

**Transaction ID : 7280146**

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

120.00

**TOTAL** This Period (last page this line number only)..... ►

5609.02



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Kamala Harris For Senate**

Mailing Address 777 S Figueroa St Ste 4050

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement  
Contribution

Candidate Name

**Kamala Harris**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2015

**Transaction ID : 7181856**

Amount of Each Disbursement this Period

5000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Louise Slaughter Re-Election Committee**

Mailing Address PO Box 30632

City	State	Zip Code
Rochester	NY	14603

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Louise Slaughter**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 25

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 7215516**

Amount of Each Disbursement this Period

2500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Schakowsky For Congress**

Mailing Address P.O. Box 5130

City	State	Zip Code
Evanston	IL	60204

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Jan Schakowsky**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 7215517**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Hastings For Congress**

Mailing Address P.O. Box 100277

City	State	Zip Code
Ft. Lauderdale	FL	33310

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Alcee Hastings**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: FL	District: 20

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 7215518**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Cicilline Committee**Mailing Address One Park Row  
Fifth Floor

City	State	Zip Code
Providence	RI	02903

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. David Cicilline**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: RI	District: 01

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7251974**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. Cleaver For Congress**Mailing Address 4801 Main Street  
Suite 1000

City	State	Zip Code
Kansas City	MO	64112

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Emanuel Cleaver II**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: MO	District: 05

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7251976**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Napolitano For Congress**

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Grace Napolitano**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 32

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7251977**

Amount of Each Disbursement this Period

2500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. Steve Cohen For Congress**

Mailing Address 349 Kenilworth Place

City	State	Zip Code
Memphis	TN	38112

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Stephen Cohen**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7252269**

Amount of Each Disbursement this Period

2500.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**C. America Works PAC**

Mailing Address PO Box 15293

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

Candidate Name

**America Works PAC**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7252270**

Amount of Each Disbursement this Period

5000.00
---------

Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00
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21500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Friends of Robyn Gabel**

Mailing Address PO Box 6453

City	State	Zip Code
Evanston	IL	60204

Purpose of Disbursement  
Robyn Gabel, STATE HOUSE 18th IL

Candidate Name

**IL Rep. Robyn Gabel**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 7215512**

Amount of Each Disbursement this Period

250.00
--------

Robyn Gabel, STATE HOUSE 18th IL

Full Name (Last, First, Middle Initial)

**B. The Committee to Elect Jay C. Hoffman**

Mailing Address PO Box 23738

City	State	Zip Code
Belleville	IL	62223

Purpose of Disbursement  
Jay Hoffman, STATE HOUSE 113th IL

Candidate Name

**Jay C. Hoffman**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 7215513**

Amount of Each Disbursement this Period

250.00
--------

Jay Hoffman, STATE HOUSE 113th IL

Full Name (Last, First, Middle Initial)

**C. Jones for State Representative**

Mailing Address 289 Paxton Ave

City	State	Zip Code
Calumet City	IL	60409

Purpose of Disbursement  
Thaddeus Jones, STATE HOUSE 29th IL

Candidate Name

**IL Rep. Thaddeus Jones**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 7215515**

Amount of Each Disbursement this Period

500.00
--------

Thaddeus Jones, STATE HOUSE 29th IL

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 93 OF 96

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Friends of Tabares**

Mailing Address 5524 S Nordica

City	State	Zip Code
Chicago	IL	60638

Purpose of Disbursement  
Silvana Tabares, STATE HOUSE 21st IL

Candidate Name

**IL Rep. Silvana Tabares**

Office Sought:	Disbursement For:
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼
<input type="checkbox"/> President	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 7215567**

Amount of Each Disbursement this Period

250.00
--------

Silvana Tabares, STATE HOUSE 21st IL

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Jim Brewster**

Mailing Address 455 29th St

City	State	Zip Code
McKeesport	PA	15132

Purpose of Disbursement  
James Brewster, STATE SENATE 45th PA

Candidate Name

**PA Sen. James Brewster**

Office Sought:	Disbursement For:
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼
<input type="checkbox"/> President	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2015

**Transaction ID : 7224380**

Amount of Each Disbursement this Period

5000.00
---------

James Brewster, STATE SENATE 45th PA

Full Name (Last, First, Middle Initial)

**C. People for Tom McCarthy**

Mailing Address 801 S Cushman

City	State	Zip Code
Tacoma	WA	98405

Purpose of Disbursement  
Void - People for Tom McCarthy check dated 5/28/2015

Candidate Name

**Tom McCarthy**

Office Sought:	Disbursement For:
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼
<input type="checkbox"/> President	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2015

**Transaction ID : 7242236**

Amount of Each Disbursement this Period

-950.00
---------

Void - People for Tom McCarthy check dated 5/28/2015

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4300.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 94 OF 96

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Wecht 2015**

Mailing Address 1119 Pennsylvania Ave

City	State	Zip Code
Pittsburgh	PA	15222

Purpose of Disbursement
David Wecht, JUSTICE OF THE SUPREME COURT PA

011

Category/  
Type

Candidate Name

**David Wecht**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2015

**Transaction ID : 7242237**

Amount of Each Disbursement this Period

5000.00
---------

David Wecht, JUSTICE OF THE SUPREME COURT  
PA

Full Name (Last, First, Middle Initial)

**B. People for Tom McCarthy**

Mailing Address 801 S Cushman

City	State	Zip Code
Tacoma	WA	98405

Purpose of Disbursement
Tom McCarthy, CITY COUNCIL - TACOMA 3rd WA

011

Category/  
Type

Candidate Name

**Tom McCarthy**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2015

**Transaction ID : 7242248**

Amount of Each Disbursement this Period

950.00
--------

Tom McCarthy, CITY COUNCIL - TACOMA 3rd WA

Full Name (Last, First, Middle Initial)

**C. Friends of John Weinstein**

Mailing Address 395 Luann Drive

City	State	Zip Code
Kennedy Township	PA	15136

Purpose of Disbursement
John Weinstein, Allegheny County - Treasurer PA

011

Category/  
Type

Candidate Name

**John Weinstein**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7252271**

Amount of Each Disbursement this Period

10000.00
----------

John Weinstein, Allegheny County - Treasurer PA

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15950.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 95 OF 96

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. Friends of Chelsa Wagner**

Mailing Address PO Box 3347

City	State	Zip Code
Pittsburgh	PA	15230

Purpose of Disbursement
Chelsa Wagner, Allegheny County - County Controller PA

Candidate Name

**Chelsa Wagner**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7253118**

Amount of Each Disbursement this Period

1200.00
---------

Chelsa Wagner, Allegheny County - County Controller PA

Full Name (Last, First, Middle Initial)

**B. Yambe for Fife**Mailing Address 2337 58th Ave East  
Apt 8

City	State	Zip Code
Fife	WA	98424

Purpose of Disbursement
Bryan Yambe, CITY COUNCIL - FIFE 1st WA

Candidate Name

**Bryan Yambe**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7253138**

Amount of Each Disbursement this Period

500.00
--------

Bryan Yambe, CITY COUNCIL - FIFE 1st WA

Full Name (Last, First, Middle Initial)

**C. Rob for Seattle**

Mailing Address 1037 NE 65th Street #141

City	State	Zip Code
Seattle	WA	98115

Purpose of Disbursement
Robert Johnson, CITY COUNCIL - SEATTLE 4th WA

Candidate Name

**Robert Johnson**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7253139**

Amount of Each Disbursement this Period

700.00
--------

Robert Johnson, CITY COUNCIL - SEATTLE 4th WA

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2400.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial)

**A. People for Sally Bagshaw**

Mailing Address PO Box 21171

City	State	Zip Code
Seattle	WA	98111

Purpose of Disbursement  
Sally Bagshaw, CITY COUNCIL - SEATTLE 4th WA

Candidate Name

**Sally Bagshaw**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7253140**

Amount of Each Disbursement this Period

300.00
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Sally Bagshaw, CITY COUNCIL - SEATTLE 4th WA

Full Name (Last, First, Middle Initial)

**B. Wilson for Assessor**

Mailing Address PO Box 1491

City	State	Zip Code
Auburn	WA	98071

Purpose of Disbursement  
John Wilson, COUNTY ASSESSOR - KING COUNTY WA

Candidate Name

**John Wilson**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7253142**

Amount of Each Disbursement this Period

950.00
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John Wilson, COUNTY ASSESSOR - KING COUNTY WA

Full Name (Last, First, Middle Initial)

**C. Vote Sawant**

Mailing Address PO Box 85862

City	State	Zip Code
Seattle	WA	98145

Purpose of Disbursement  
Kshama Sawant, CITY COUNCIL - SEATTLE 3rd WA

Candidate Name

**Kshama Sawant**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2015

**Transaction ID : 7253145**

Amount of Each Disbursement this Period

700.00
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Kshama Sawant, CITY COUNCIL - SEATTLE 3rd WA

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1950.00
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25600.00
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